## N12000006567

(Re	questor's Name)	<del>-</del>
(Ad	dress)	
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(Cit	ry/State/Zip/Phone #	<i>f</i> )
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	<del>)</del>
(Do	cument Number)	1
Certified Copies	Certificates o	of Status
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DIVISION OF CORPURATION

Amend + MC

MAY 2 1 2013

T. BROWN

## **COVER LETTER**

Division of Corporations	
NAME OF CORPORATION: Irinidad + Tobago Carib	bean Carnival Cultury ASS INC.
DOCUMENT NUMBER: N120000 65 6	7
The enclosed Articles of Amendment and fee are submitted for fi	ung.
Please return all correspondence concerning this matter to the foli	
Carlson S Gilkes	
(Name of C	Contact Person)
(Firm/	Company)
12865 SW 43rd Circle	
(A	ddress)
Ocala F1. 34473 (City/ State	
(City/ State	and Zip Code)
Lenwarru@Centurylink E-mail address: (to be used for future	
For further information concerning this matter, please call:	
Carlson Gilkes a	(352, 470-7799
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the	Florida Department of State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & \Bigcup \\$43.75 Filing Fee & Certificate of Status Certified (Addition enclosed)	Copy Certificate of Status nal copy is Certified Copy
Mailing Address	Street Address
Amendment Section Division of Corporations	Amendment Section Division of Corporations

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the	Carnival Cultural Association I e Florida Dept. of State)	
M12000006567 (Document Number of Cor		
(Document Number of Cor	orporation (if known)	
ursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	tatutes, this Florida Not For Profit Corporation adopts the f	ollowing
. If amending name, enter the new name of the corpo		
Magnificent" 7" Caribbean	n Cultural Association Inc. poration" or "incorporated" or the abbreviation "Corp." o	The new
ame must be distinguishable and contain the word "corp	poration" or "incorporated" or the abbreviation "Corp." o	r "Inc."
Company" or "Co." may not be used in the name.	NA	
. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRE		
The incipal office address into the first of	/	
. Enter new mailing address, if applicable:		글
(Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	3 TS
		<b>三</b>
		<b>1</b>
		2
. If amending the registered agent and/or registered new registered agent and/or the new registered officered office		ن ح
Name of New Registered Agent:	XI A	ယ္
Name of New Registerea Agent.	AL CI	
<del></del>	(Florida street address)	
New Registered Office Address:		
	, Florida	
(C	City) (Zip Code)	
ew Registered Agent's Signature, if changing Registe	ered Agent:	
, ,	um familiar with and accept the obligations of the position.	
Signature of New P	( )} Registered Agent, if changing	
Signature of New K	regisierea Ageni, ij changing	

Page 1 of 4

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	PT John I V Mike . SV Sally S	<u>Iones</u>	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change Add Remove	<u>P</u>	Carlson S. Gilkes	12865 SW 43rd Circle Ocala FL 34473
2)Change	<u>P</u> _	Colson F. Gilkes	12865 SW 43rd Circle Ocala FL 34473
Remove 3)ChangeAdd			
Remove 4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			
			<del></del>

amending or adding additional Art track additional sheets, if necessary).	(Be specific)				
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The date of each amendment(s) adoption: May 5 <sup>th</sup> 2013  Effective date if applicable: May 8 <sup>th</sup> 2013  The more than 90 days after amendment file date)	_
Gno more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
Dated May 5# 2013 Signature May 5# 2013	
Signature Alleria	
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Taulinus Warrick (Typed or printed name of person signing)	
Secretary (Title of person signing)	
(Title of person signing)	